24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
House Majority PAC	
	C C00495028
Check if 24-hour report X 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y
Full Name of Payee	Date of Public Distribution/Dissemination
Go Daddy	09 11 2014
Mailing Address 14455 N Hayden Rd	Amount
Ste 219	
City State Zip Code	21.92
Scottsdale AZ 85260-6993	Transaction ID: VN7GD9VDZM3 Date of Disbursement or Obligation
Purpose of Expenditure Website Expenses Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	Sought: X House District: 18
Nan Hayworth Oppose	President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	ursement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
Gumbinner Davies & Simpson Communications	09 11 2014
Mailing Address 2001 S St NW	03 11 2014
Ste 301	Amount
City State Zip Code	27554.87
Washington DC 20009-1164	Transaction ID : VN7GD9VBH08 Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail - Estimate Category/	M M / D D / Y Y Y Y
Type Type	
Name of Federal Candidate Support Office	e Sought: X House District: 11
Michael Grimm Oppose	President Senate State: NY
	ursement For: Primary X General
Per Election for Office Sought 69240.62 2014	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	27576.79
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of eithe party committee) any political party committee or its agent.	• • •
24.0	9 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	DENT EXTEN	JII OILLO	PAGE 2 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
House Majority PAC			C C00495028
Check if 24-hour report X 48-hour repor	t New re	port Amends repo	rt filed on
Full Name of Payee Mission Control, Inc.			Date of Public Distribution/Dissemination
Mailing Address 114 Mansfield Hollow Rd			09 12 2014
# A			Amount
City	State	Zip Code	21972.80
Mansfield Center	СТ	06250-1316	Transaction ID : VN7GD9VCWQ1 Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail		Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate		Support	Office Sought: X House District:03
Thomas MacArthur		X Oppose	President Senate State: NJ
Calendar Year-To-Date Per Election for Office Sought		99674.40	Disbursement For:
Full Name of Payee			Date of Public Distribution/Dissemination
Waterfront Strategies			09 11 2014
Mailing Address 3050 K St NW			Amount
Ste 100	State	Zip Code	29716.50
Washington	DC	20007-5108	Transaction ID : VN7GD9VE134 Date of Disbursement or Obligation
Purpose of Expenditure Online Advertising		Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate		Support	Office Sought: House District: 18
Nan Hayworth		X Oppose	President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought		189910.61	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expe	nditures		51689.30
(b) SUBTOTAL of Unitemized Independent Ex	penditures		·
(c) TOTAL Independent Expenditures			>
	andidate or authorize		not made in cooperation, consultation, or concert either, or (if the reporting entity is not a political
Nicholas Pancrazio	[Electro	nically Filed] Date	09 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
-			

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 3 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
House Majority PAC	C C00495028
	0 000 100020
Check if 24-hour report	M / D D / Y B Y B Y
Waterfront Strategies	f Public Distribution/Dissemination
Mailing Address 3050 K St NW	
Ste 100	ıt
City State Zip Code	41685.75
	action ID: VN7GD9VE150 If Disbursement or Obligation
Purpose of Expenditure	M / D D / Y Y Y Y
Name of Federal Candidate Support Office Sought:	:: X House District: 11
Michael Grimm Support Office doughts Oppose Presider	
Calendar Year-To-Date Per Election for Office Sought Disbursement 2014 2014	
Ott	her (specify)
<u> </u>	of Public Distribution/Dissemination
Mailing Address	
Amoun	nt
City State Zip Code	
Date o	1.5: however at an Obligation
Purpose of Expenditure Category/	of Disbursement or Obligation
Type	
Name of Federal Candidate Support Office Sought	t: House District:
Oppose Preside	ent Senate State:
Calendar Year-To-Date Disbursement	t For: Primary General
Per Election for Office Sought Ot	ther (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	41685.75
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	120951.84
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cowith, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the party committee) any political party committee or its agent.	
Nicholas Pancrazio [Electronically Filed] Date 09	12 2014
Signature	